

In vivo imaging studies of cytisineDorota Bartusik^{1,*}, David Aebisher², Piotr Tutka^{3,4}¹Southern Polytechnic State University, Department of Biology and Chemistry, 1100 South Marietta Parkway, Marietta, Georgia 30060, USA²Shorter University, Natural Sciences Department, 315 Shorter Ave, Rome, Georgia 30165, USA³University of Rzeszów, Department of Pharmacology, Al. Rejtana 16C, 35-959 Rzeszów, Poland⁴University of Rzeszów, Laboratory of Pharmacoepidemiology, Laboratory of Drug Development, Centre for Innovative Research for Medical and Natural Sciences, Al. Rejtana 16C, Rzeszów, Poland*corresponding author e-mail address: dorota.bartusik@gmail.com**ABSTRACT**

Cytisine, a plant alkaloid available as an effective treatment for smoking dependence, is used to target the nicotinic acetylcholine receptor (nAChR). Direct detection of nAChR localization *in vivo* in the brain can help to understand the mechanism of cytisine antismoking action and improve clinical treatment. However, visualization of cytisine targeting *in vivo* requires suitable techniques for assaying molecular interactions noninvasively. For use in clinical imaging techniques, the cytisine molecule requires chemical modification to be visualized *in vivo*. Herein, we review the current development of modified cytisine probes for detection using positron emission tomography (PET), single photon emission computed tomography (SPECT) and computed tomography (CT). The detection of cytisine using magnetic resonance imaging (MRI) is also discussed.

KEYWORDS: *cytisine, nicotinic acetylcholine receptors, Magnetic Resonance Imaging, Positron Emission Tomography, monitoring.*

1. INTRODUCTION

Advances in *in vivo* clinical techniques such as positron emission tomography (PET), single photon emission computed tomography (SPECT), computed tomography (CT) and magnetic resonance imaging (MRI) can provide internal images of neuronal structure and function. The clinical techniques (PET, SPECT, CT, MRI) can be used to obtain images before and after treatment to evaluate drug localization and efficiency in diseased tissue. These techniques provide high-resolution and high-sensitivity detection. To obtain images using PET, SPECT and CT, radiotracer drugs radiolabeled with markers have to be synthesized. The basic requirements for a radiotracer are (1) rapid preparation; (2) binding affinity for the targeted receptor; (3) penetration through the intact blood-brain barrier; and (4) efficient *in vivo* accumulation. Detection of the distribution of drugs *in vivo* remains a major difficulty. The appearance of the same molecules in healthy and diseased brain tissues makes discrimination difficult. In addition to the clinical techniques mentioned above, magnetic resonance imaging (MRI) has been gaining in popularity for the detection and imaging of *in vivo* drug targeting, bio-distribution and drug metabolism. MRI has offered additional tools for drug discovery and development, evaluation of

pharmacokinetic properties and monitoring drug efficacy. *In vivo* imaging of drug delivery, release and subsequent monitoring of the therapeutic outcomes can greatly aid and enhance treatment. Our interest is in the imaging of cytisine targeting of the nicotinic acetylcholine receptor (nAChR) which is a ligand-gated ion channel crucial to normal and diseased brain physiology. The nAChR is a therapeutic target in a wide range of pathological conditions such as Parkinson's disease, neuropathic pain and nicotine addiction [1]. Using PET, CT or SPECT *in vivo*, cytisine ligands of the nAChR have to be labeled with radiotracers such as carbon-11 or fluorine-18. The syntheses of cytisine radioligands is time sensitive and must be accomplished without radioactive dilution with stable isotope. In this review, insights in nAChR targeting with radiolabeled cytisine is discussed. Briefly, cytisine, an alkaloid from the plant *Laburnum anagyroides* Med., (*Cytisus laburnum* L., *Fabaceae*), has been classified as a selective, low-efficacy partial agonist of $\alpha_4\beta_2$ subunit of the nAChR [2,3]. Several syntheses of radiolabeled cytisine derivatives for image monitoring of distribution and targeting has been achieved and are described in this review.

2. EXPERIMENTAL AND METHODS

The research discussed here reflects the use of cytisine and *in vivo* imaging techniques. The data was collected from the PubMed database.

3. RESULTS: *IN VIVO* IMAGING STUDIES

The nicotinic subunit $\alpha_4\beta_2$ of nAChR expressed in the human brain was imaged and reported using PET and SPECT [4]. A nine α (α_2 - α_{10}) and three β (β_2 - β_4) subunits have been identified that are distributed throughout the central nervous system (CNS) [4,5]. Among the several nAChR subtypes in the CNS, the homomeric α_7 and heteromeric $\alpha_4\beta_2$ subtypes are predominant in the brain. These subtypes are best characterized in terms of their ligand selectivity and they can be studied by means of binding

techniques: [³H]cytisine or [³H]nicotine can label $\alpha_4\beta_2$ nAChR, and [¹²⁵I] α -bungarotoxin or [³H]methyllycaconitine is used to label α_7 nAChR. Cytisine is a partial agonist of the $\alpha_4\beta_2$ nAChR subtype and has been used as a tritiated radioligand to probe nAChR function. The current known radiotracer probes are ¹⁸F-2-FA85380 for PET [6,7] and ¹²³I-5-A85380 for SPECT [8,9]. Following intravenous injection of N-[¹¹C] methylcytisine (Figure 1), uptake in a baboon brain was studied and showed an uptake

concentration different from blood radioactivity. *In vivo* binding of [^{11}C] appeared different from *in vivo* binding of [^3H] cytosine [10]. 9-(fluorophenyl)cytosine derivatives were obtained in a Suzuki coupling of 4-fluorobenzeneboronic acid and 9-bromo-N-Boc cytosine [11, 12, 13]. Decarbonylation of this labeled aldehyde with Wilkinson catalyst afforded 4- [^{18}F] fluorobromobenzene. As compared to homoaromatic and aliphatic nucleophilic radiofluorinations, nucleophilic substitution of a nitro group by a fluoride [^{18}F] in the pyridine series appears to be a highly efficient

method for the synthesis of ^{18}F -radiotracers of high specific activity [14]. The cytosine radiotracer was formed in one step from the corresponding nitro derivative. Nitropyridine [15] and 9-(2-fluoro-5-pyridinyl)cytosine [16], were prepared by a Stille coupling of iodocytosine [17]. Another reaction to generate radiotracer was cytosine with fluoroiodobenzene [18]. Allain Barbier and coworkers demonstrated the possibility of carrying out the reaction of cytosine with 4- [^{18}F] fluorobromobenzene (Figure 2) [19].

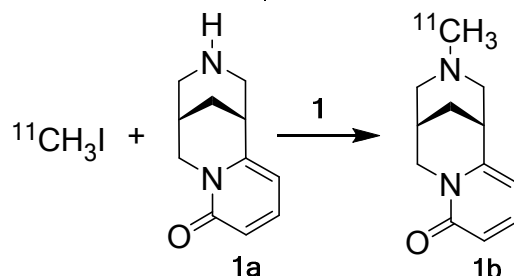


Figure 1. Radiosynthesis of [^{11}C] Methylcytosine (1b) using cytosine (1a).

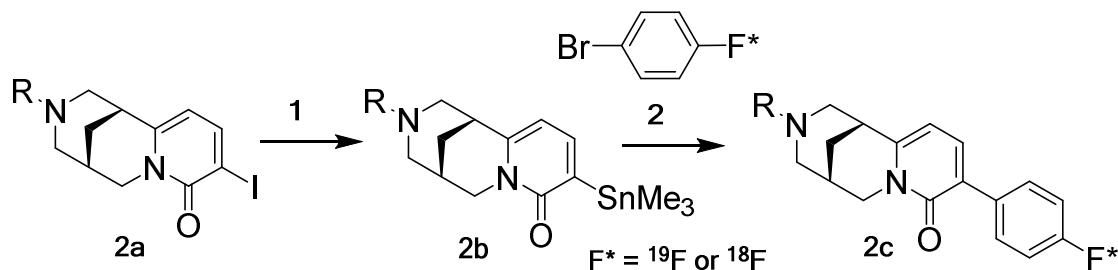


Figure 2. Synthesis of 9-(4- [^{18}F] fluoropyridinyl) cytosine (2c) where R = an aliphatic group.

The limited number of *in vivo* MRI papers related to drug delivery to the brain is surprising low with respect to the broad availability and capability of this *in vivo* method. In a study by Chefer and coworkers, cytosine (1 mg/kg) was subcutaneously injected into the blood stream and binding of cytosine to the nAChR was detected by MRI which imaged the spatial distribution of cytosine in brain [20]. Using co-registered MRI/PET images, Allen et. al (1997) identified densities of nAChR in the brain. The uptake of radiotracer was detected and showed dysfunction of brain using MRI [21]. Abnormalities of the nAChR in autism were also detected using the radioligand, 6-chloro-3-((2-(S)-azetidiny)methoxy)-5-(2-fluoropyridin-4-yl) pyridine using PET/MRI imaging *in vitro* and *in vivo*. Estimated binding potential values in different brain regions which characterize the specificity of receptor binding of radiotracer have been provided [22]. In another study, nAChR occupancy in the human brain was detected using varenicline (0.5 mg) which is a derivative of cytosine, commonly prescribed for smoking cessation. This finding demonstrates that a low dose of varenicline

saturates $\alpha_4\beta_2$ nAChR in the human brain [23]. Functional mapping using imaging techniques such as functional magnetic resonance imaging (fMRI) measure the hemodynamic response of the brain in relation to drug activity [24]. In another study, decreased acetylcholine levels in ^3H -cytosine-labeled nicotinic $\alpha_4\beta_2$ receptors was studied by PET and MRI [25]. The binding of [^3H]cytosine in rat brain homogenates was examined and showed 60-90% total binding at all concentrations examined up to 15 nM. The nicotinic cholinergic agonists nicotine, acetylcholine, and carbachol compete with high affinity for [^3H]cytosine binding sites, whereas among nicotinic receptor antagonists only dihydro-beta-erythroidine competes with high affinity. Comparison of binding in several brain regions showed that [^3H]cytosine binding is higher in the thalamus, striatum, and cortex than in the hippocampus, cerebellum, or hypothalamus. The pharmacology and brain regional distribution of [^3H]cytosine binding sites are those predicted for neuronal nicotinic receptor agonist recognition sites[25]. The high affinity and low nonspecific binding of [^3H]cytosine makes it a useful ligand for studying nAChR.

4. CONCLUSIONS

This review has shown that cytosine is molecule with a unique and synthetically and functionally challenging structure which can bind to the $\alpha_4\beta_2$ subunit of nAChR. During the past century, in particular in the last two decades, enormous progress

has been made in understanding the chemistry of cytosine. The introduction of radionuclei to the structure of cytosine markedly improved the monitoring of drug *in vivo*.

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